

Form CPF M 102: Campaign Finance Report

Municipal Form
Office of Campaign and Political Finance

51 Inman 51- 2007 W. Cambrida MA 02139
File with: City or Town Clerk or Election Commission Please print or type all information, except signatures.
Fill in dates: Reporting Period Beginning Month Date Year Year Reporting Period Beginning Month Date Year A 2007
Type of report: (Check one) 8th day preceding preliminary
Full Name of Candidate (If applicable) School Om wittee Office Sought and District 23 Selevough AV Residential Address [017-497-5999] Tel. No. (optional) Committee to Euch Manla Entering Chantal LA Fuji Wara Name of Committee Treasurer 28 Green Ough Ave Committee Mailing Address
SUMMARY BALANCE INFORMATION: Line 1: Ending balance from previous report Line 2: Total receipts this period (page 2, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 3, line 14) Line 5: Ending balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 4) Line 7: Total (all) outstanding liabilities (page 4) Line 8: Name of bank(s) used
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury: 3/14/2007 Treasurer's signature (in ink)
FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)
Affidavit of Candidate: (check 1 box only) Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period. Candidate without Committee OR Candidate with independent activity filling separate report I certify that I have examined his report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury: Candidate signature (in ink)

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or mor	
		·			
Line 9: T	Total receipts in excess of \$50 (or listed above)				
	otal receipts \$50 and under* (not listed above)				
	TOTAL RECEIPTS IN THE PERIOD	0	_	Enter on page 1, line 2	

^{*} If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

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SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Am	ount
2/8/07	888 Women's Histor Project: Inc Eviction Free Zono	6 Spring St. Con	& donation	200	
3/13/07	Eviction Free Zone	55 Norfolk Sla	mbolonotra	142	61
					STALES CONTROL AND ANY ANY
	*				
				 	
	<u> </u>				
I		Line 12:	Expenditures over \$50	342	61
		Line 13:	Expenditures \$50 and under*	10	
1	Enter on page 1, line 4	Line 14:	TOTAL EXPENDITURES	352	61

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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Schedule E Municipal Form

Disclosure of Assets Statement Office of Campaign and Political Finance

2007 445 45 4 40 5

(Massachusetts	701	17 MAR 15 A 10: 51	i e	
le with: City or Town Clerk or Election Commiss	ion		CPF ID#	
This form should be filed by			· · · · · · · · · · · · · · · · · ·	
ommittee Name: Com modelee	bo Elect	Mana Eslie	Date of re	port: 3/14/2
43 A. P		:	A D D	
	ididates and co	ommittees must fill in Pa	in A or Pan B.	
ırt A:				
No assets* were acquired or dispe	osed of by this	candidate/committee dur	ing the period covered	by this statement.
art B:				
ssets acquired: List all assets acquired:	uired since the	committee last filed this	statement. If this is th	ne first Schedule E ye
ive filed, list all assets.				•
Asset	Date	Present Location	Manner Acquired	Cost/Value
clude year, model or other identifying	Acquired			1.
formation, if applicable.				
1990)				
				41
ssets disposed of: List all assets so	ld traded or tra	neferred during the renor	ting period covered by t	this statement
	Date	Disposition to:	Date and Manner	Disposition Value
Asset clude year, model or other identifying		Name and Address	of Disposition	Attach statement of how
formation, if applicable.	Acquired	Name and Address	Oi Disposition	value is determined.
		•		
ssets acquired by a political committee mu	et he used for the	political number for which th	e committee is organized at	nd must remain the prope
that committee. Assets may be disposed	of at any time, but	must be disposed of prior to	dissolution.	
An asset is defined as any one item that ha				siness environment, and h
cost/value of \$1,000 or more at the time of	acquisition.			
		S:a	ned under the penalties of p	eriurv
igned under the penalties of perjury:		218	ned under the penalties of p	erjury.

Attach additional sheets, if necessary, to disclose all assets acquired or disposed of in a reporting period.

Candidate signature

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		Line 15:	In-kind over \$50	
		Line 16:	In-kind \$50 and under	
	Enter on page 1, line 6	Line 17:	Total In-kind	9

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
			10-40 (24) 17-44 17-17-18-18-18-18-18-18-18-18-18-18-18-18-18-	pa :
	Enter on page 1, line 7	Line 18: OUTSTANDING LI	ABILITIES (ALL)	0

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

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